

Illinois MIECHV Benchmarks and Constructs and where to find in Visit Tracker (REV 12/6/13)

Benchmarks	Constructs	Timeline for Collection and Reporting	Where within Visit Tracker to Enter the Data
A. Improved Maternal and Newborn Health	Construct 1: Prenatal Care	Since case opening	At each personal contact while prenatal, ask, "Approximately when was your last prenatal care medical visit?" and indicate the visit date either on the PVR (where it says "medical provider visit" in the child section for the prenatal child) or on the Health Info page for the prenatal CHILD. <sup>i</sup> Prenatal children are added into Visit Tracker as soon as the pregnant mother is enrolled. Use "Baby" as their name, "P" as their gender, and enter their due date instead of Birth date.
	Construct 2- Parental use of alcohol, tobacco or illicit drugs	On-going until case closing	On the first personal contact with the guardian, you will need to ask the below questions and record the answers on the PVR or on the Health Info page for the Guardian. At any time you learn of a change, go to Guardian -Health Info screen to add an additional entry.  Has parent smoked any cigarettes in the past two weeks? Has parent drank alcohol in last 30 days? Has parent used illicit drugs in last 30 days?
	Construct 3- Preconception care	At 6 weeks postpartum	This data should be entered on the PVR or on guardian-Health info- when child is six weeks old.
	Construct 4- Inter-birth intervals	At 6 weeks postpartum	At any personal contact, discuss & counsel on inter-birth intervals and note that in the appropriate section on the PVR. <sup>ii</sup>
	Construct 5- Screening for maternal depressive symptoms.	Screened at least once during the third trimester of pregnancy or the first two months postpartum	At any personal contact, note if you conducted a screening for the maternal depressive symptoms. <sup>iii</sup> (If a referral is made as a result of this depression screening, please enter it also on this PVR or in guardian resource referral). A maternal depression screening may also be entered in guardian assessments. Click on EPDS and enter score.

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	Construct 6- Breastfeeding	Until 6 months postpartum	At every personal contact until the answer is “weaned” or “never”, note if the child is being breastfed and the # of weeks so far or if the child was Never breastfed or has been weaned. <sup>iv</sup>
	Construct 7- Well-child visits	Until child reaches 15 months of age	At each personal contact, ask the mother if the child has visited a health care provider since your last visit. Note the approx. date and reason on the PVR. Or enter in child Health information under child medical visits
	Construct 8. Maternal & child health insurance status.	On-going until case closing	Upon enrollment and quarterly, ask if primary guardian and children are insured. Note this on the Health Info page for the guardian and child. Update this on the Health Info, anytime you learn of a change.
B. Reduced Child Abuse and Neglect and ER Visits	Construct 9- Visits for children to the emergency department from all causes	On-going until case closing	At each personal contact, ask the mother if the child has visited a health care provider since your last visit. Note the approx. date and reason on the PVR or in the child’s health information screen.
	Construct 10- Visits of mothers to the emergency department from all causes.	On-going until case closing	At each personal contact, ask the mother if they have visited a health care provider since your last visit. Note the approx. date and reason on the PVR or in the guardian’s health information screen.
	Construct 11- Information provided or training of participants on prevention of child injuries topics	On-going until case closing	At any personal contact, note if you discussed prevention of child injuries and note that in the appropriate section on the PVR. <sup>v</sup>
	Construct 12- Incidence of child injuries requiring medical treatment.	On-going until case closing	At each personal contact, ask the mother if the child has visited a health care provider since your last visit. Note the approx. date and reason on the PVR or on child health information screen. All medical visits with “injury” notes as the reason will count here.
	Construct 13- Reported suspected maltreatment for children in the program (allegations that were screened	On-going until case closing	N/A this will be collected from DCFS

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	in but not necessarily substantiated).		
	Construct 14- Reported substantiated/indicated maltreatment (substantiated/indicated/alternative response victim) for children in the program.	On-going until case closing	N/A this will be collected from DCFS
	Construct 15- First-time victims of maltreatment for children in the program.	N/A- Administrative Data	NA
C. Improvement in School Readiness and Achievement <sup>vi</sup>	Construct 16- Parent support for children's learning & development (e.g., appropriate toys available; read & talk with child).	N/A- Field Data collectors will be collecting (PICCOLO and HOME)	N/A- Field Data collectors will enter scores on scantron or directly in Visit Tracker.
	Construct 17- Parent knowledge of child development & of their child's developmental progress.	N/A- Field Data collectors will be collecting (KIDI)	N/A- Field Data collectors will enter scores on scantron or directly in Visit Tracker.
	Construct 18- Parenting behaviors & parent-child relationships (e.g. discipline strategies, play interactions).	N/A- Field Data collectors will be collecting (PICCOLO)	N/A- Field Data collectors will enter scores on scantron or directly in Visit Tracker.
	Construct 19- Parenting behaviors & parent-child relationships (e.g. discipline strategies, play interactions).	N/A- Field Data collectors will be collecting (KIDI)	N/A- Field Data collectors will enter scores on scantron or directly in Visit Tracker.
	Construct 20- Parent emotional well-being or parenting stress.	N/A- Field Data collectors will be collecting (PSI)	N/A- Field Data collectors will enter scores on scantron or directly in Visit Tracker.
	Construct 21- Child's general development	ASQ-3 completed at 6, months, 12 months and annually thereafter	Enter ASQ-3 screening by pulling up the child in Visit Tracker, click "screenings" on the left, then Click "New Screening", and when the screening record pops up, scroll down to the Development area and choose the ASQ-3 tool. Note scores and if there was a concern in any area, check that area. <sup>vii</sup> If you made a referral to another agency as a result of a concern

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			found, note that at the bottom of the screen.
	Construct 22- Child's general cognitive skills.	ASQ-3 completed at 6, months, 12 months and annually thereafter	Scores entered as explained in construct 21 above
	Construct 23- Child's positive approaches to learning including attention.	ASQ-3 completed at 6, months, 12 months and annually thereafter	Scores entered as explained in construct 21 above
	Construct 24- Child's social behavior, emotion regulation & emotional well-being.	ASQ-SE completed at 6, months, 12 months and annually thereafter	Scores entered as explained in construct 21 above except the screening tool chosen will be ASQ-SE and the score will only go in the social-emotional area and concern noted if applicable.
	Construct 25- Child's physical health & development (well-child visits).	Until child reaches 15 months of age	No extra data is needed here because home visitors have entered well-child visits on construct 7.
D. Domestic Violence	Construct 26- Screening for domestic violence	Within 45 days of case opening and quarterly thereafter	To enter that a domestic violence screening was conducted, on the PVR, check the appropriate box "DOVE/Futures Without Violence/4 P's". <sup>viii</sup> or enter a score on the guardian assessments page in the Futures screen
	Construct 27- Referrals for domestic violence services for families with identified need.	When score on relationship assessment tool is positive	Enter a score on the guardian assessments page in the Futures screen. Scores of 21 and above require a referral to domestic violence services. Indicate a referral was made by clicking the "R" next to Domestic Violence Services (construct 27) <sup>ix</sup> on the PVR or go to guardian Resource referral screen and document the referral there.
	Construct 28- Safety plan completed for families with identified DV need.	When score on relationship assessment tool is positive	Create a Domestic Violence Safety plan if screened positive on construct 26. To do so, from either the PVR Goals section or under the Guardian Goals link on the left, create a "Domestic Violence Safety Plan" Goal. Go ahead and click "Met" to indicate a safety plan was made. <sup>x</sup>
E. Family Economic Self Sufficiency	Construct 29- Household* income & benefits.	On-going until case closing	Indicate Household income & # in home on the Guardian Demographics screen – scroll to bottom. This should be done at enrollment and checked

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			quarterly . <sup>xi</sup> The MIECHV Household is considered the primary guardian, the other parent but only if they live in the home and all of the children.
	Construct 30- Graduation from high school or obtained a General Equivalency Diploma for enrolled guardian.	On-going until case closing	In the Guardian PVR, in the Goals section, create a goal with goal area of “Education”. Change the status to “met” when guardian reaches their goal.  Indicate the Primary parent employment & education on the Demographics screen – scroll to bottom (see xii). This should be done at enrollment and checked quarterly.
	Construct 31- number of hours per month spent by primary parent in employment & educational programs	On-going until case closing	The # of hours spent in employment and education is indicated in data entry from construct 30.  (# of hrs in care of infant will be inferred by state sys.)
	Construct 32- Household Health insurance status.	On-going until case closing	Indicate Health insurance status of the household on the Guardian Health Info screens. This should be done at enrollment and checked quarterly. The MIECHV Household is considered the primary guardian, the other parent but only if they live in the home and all of the primary guardian’s children.
F. Coordination and Referrals	Construct 33- Number of families identified for necessary services.	On-going until case closing	Indicate whether guardian receives a EPDS (as appropriate) or Futures DV screen in the guardian assessment section. Indicate whether a child receives their 12 month ASQ in the child screening section
	Construct 34- Number of families with an identified service need who are referred to an available community service within one month of positive screening	On-going until case closing	Document a referral in the guardian’s Resource Referral section whenever the EPDS score is 14 or above or the Futures score is 21 or above. Document a referral on the child’s ASQ when there is a concern noted.
	Construct 35- The number of families who complete referrals to available community resources	On-going until case closing	When a referral is made, later, the home visitor needs to do “follow-up” and note if the Guardian “received services” (ie. Did the parent get in touch

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			<p>with the agency and at least pursue services). Go to the Guardian – Resource Referral screen and click the Edit button on the referral and then note the date you conducted follow-up and then note if the Guardian did “receive services”. Only Guardians who “received services” will be counted as “completed referrals”. <sup>xii</sup> <b>OR, if the referral was made on the ASQ screening data entry page as a result of a delay, go back to that screening entry and note the follow-up information at the bottom. Answer Yes to the question “Was service/intervention received as a result of this referral?”</b></p>
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\*A household is defined as mother and father (if father resides in the household)

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<sup>i</sup> The PVR can be found by going to the Guardian record (not child), then click “Contact History” on the left and then click the word “Private” associated with the visit date previously scheduled.

**Family well-being factors discussed:**

**(choose "I" if information was shared, "R" if referral was made, "N" for nothing)**

- ii      N   I   R                                      N   I   R  
         ☐   ☐   ☒ Adult Education, job training, college      ☒   ☐   ☐ Inter-birth Intervals

**Were any of the following completed?**

- iii      ☐ Family-centered assessment   ☐ Parenting assessment   ☒ Depression Screening

- iv      **Breastfeeding Survey:**   ☒ Ongoing   ☐ Never   ☐ Weaned    Total wks breastfed

- v      ☒   ☐   ☐ Injury Prevention

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### Development

Developmental Screening Completed?

☒ Yes ☐ No

Screening Type

ASQ-3 (National) ▼

Screening Result

Concern ▼

	Score	Delay / Concern
Communications	25	<input checked="" type="checkbox"/>
Gross Motor	45	<input type="checkbox"/>
Fine Motor	40	<input type="checkbox"/>
Intellect/Prob Solve	50	<input type="checkbox"/>
Personal-Social	52	<input type="checkbox"/>

### Were any of the following completed?

- ☐ Family-centered assessment ☐ Parenting assessment ☐ Depress  
☒ DOVE/Futures Without Violence ☐ Other outcomes measurement

*4 P's will be added soon.*

☒ ☐ ☐ Domestic Violence Services

Goal Area

Domestic Violence Safety Plan ▼

Goal

Status

☐ Abandoned ☐ Met ☒ Unmet Date Met







### Primary Parent Employment History

Add Item

Date	#hrs/wk	
1/18/2013	20	 



### Primary Parent Education History

Add Item

Date	Status	#hrs/wk	
1/18/2013	Associate degree/training certif	15	 
5/24/2013	Bachelor degree or higher	0	 

### Family Income History



Add Item

Date	avg.Monthly	# in house	Income type	
1/18/2013	1200	5	Salary/Wages Child Support/alimony WIC Food Stamps	 

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## Resource Referral

▼

Referral Date	<input type="text" value="5/21/2013"/> 
Referral Type	<input type="text" value="Health Insurance, CHIP"/>
Referred by	<input type="text" value="Louisa A ()"/> ▼
Referral To	<input type="text" value="health insurance people"/>
Referral Reason	<input type="text" value="lost job lost insurance"/>
Referral Follow-up Date	<input type="text"/> 
Family Received Services	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> Unknown
Comments	<input type="text"/>

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